



Department of Permitting Services
Division of Building Construction
255 Rockville Pike, 2nd Floor
Rockville, MD 20850-4166
Phone: 311 in Montgomery County or (240) 777-0311
Fax (240)-777-6262
<http://www.montgomerycountymd.gov/permittingservices>



Application for Sign Permit

A. Type of Sign Permit

Type:

- ☐ Permanent Sign
- ☐ Limited Duration Sign

FOR OFFICE USE ONLY:

Sign A/P#: _____
Sign Tag#: _____
Electrical A/P#: _____
Sign Permit Fee: _____
Date: _____

B. Location of Sign

Address _____
City _____ State _____ Zip Code _____
Lot _____ Block _____ Parcel _____

If a limited duration sign is located within the public right-of-way, provide block number of street

C. Applicant Information

Name of Applicant _____ Phone # _____
Address _____ City _____ State _____ Zip Code _____
Contact Person _____ Phone # _____
Sign Installer _____ License # _____
Address _____ Phone # _____
City _____ State _____ Zip Code _____

D. Permanent Sign Information

- ☐ On Building Wall ☐ Freestanding ☐ Canopy
- ☐ Illuminated ☐ Non-illuminated

Sign Message: _____

Sign Dimensions:

Length _____ feet _____ inches Width _____ feet _____ inches
Sign Area: _____ square feet Sign Height: _____ feet _____ inches
(top of sign to grade or sidewalk)

Number of Faces _____ Building Frontage _____ Linear feet Lot Width at Street: _____
Total area of all signs currently on building/premises: _____ square feet

E. Limited Duration Sign Information

LOCATION:

- ☐ Public Right-of-Way
Or
☐ Private Property

Sign Message: _____

Sign Dimensions:

Length: _____ feet _____ inches Width: _____ feet _____ inches
Sign Height: _____ feet _____ inches

TIME OF DISPLAY:

- ☐ Weekends Only
Or
☐ Other Time Period

F. To Be Read by the Applicant

Any information that the applicant has set forth in this application that is false or misleading may result in the rejection of this application. A condition for the issuance of this permit is that the proposed construction will comply at all times with the plans as approved by all applicable government agencies. I hereby declare and affirm, under the penalty of perjury, that all matters and facts set forth in this sign permit application are true and correct to the best of my knowledge, information and belief.

Original Applicant's Signature

Date

Print Name

(If applicant is other than property owner, authorized agent must complete affidavit below)

AUTHORIZED AGENT AFFIDAVIT:

I hereby declare and affirm, under the penalty of perjury, that:

1. I am duly authorized to make this permit application on behalf of:

(Print property owner's name)

2. The work proposed by this sign permit application is authorized by the property owner, and

3. All matters and facts set forth in this Affidavit are true and correct to the best of my knowledge, information and belief.

Original Authorized Agent's Signature

Date

Print Name